



Docket No.: 07529/100F590-US1  
(PATENT)

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Patent Application of:  
Ralph M. STEINMAN and Christan MUENZ

Application Serial No.: 10/049,316

Group Art Unit: 1645

Filing Date: February 8, 2002

Examiner: Not yet assigned

For: PROTECTIVE ANTIGEN OF EPSTEIN BARR  
VIRUS

**THIRD PRELIMINARY AMENDMENT**

Mailstop Non-Fee Amendment  
Commissioner of Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Dear Sir:

Prior to examination on the merits, please amend the above-identified U.S. patent application as follows:

**Amendments to the Claims** are reflected in the listing of claims which begins on page 2 of this paper.

**Remarks/Arguments** begin on page 9 of this paper.

10/23/2003 CCKAUI 00000092 040100 10049316

01 FC:2202	99.00	OP
02 FC:2201	5.00	DA



image

10-20-03

10/16/03  
1645

AMENDMENT TRANSMITTAL LETTER				Docket No. 07529/100F590-US1		
Application No. 10/049,316	Filing Date February 8, 2002	Examiner Not Yet Assigned		Art Unit 1645		
Applicant(s): Ralph M. Steinman, et al.						
Invention: PROTECTIVE ANTIGEN OF EPSTEIN BARR VIRUS						
<b>TO THE COMMISSIONER FOR PATENTS</b>						
Transmitted herewith is an amendment in the above-identified application.						
The fee has been calculated and is transmitted as shown below.						
<b>CLAIMS AS AMENDED</b>						
	Claims Remaining After Amendment	Highest Number Previously Paid	Number Extra Claims Present	Rate		
<b>Total Claims</b>	45	- 34 =	11	x 18	198.00	
<b>Independent Claims</b>	13	- 8 =	5	x 84	420.00	
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>						
Other fee (please specify): one independent claim not previously paid						
<b>TOTAL ADDITIONAL FEE FOR THIS AMENDMENT:</b>					618.00	
<input type="checkbox"/> Large Entity			<input checked="" type="checkbox"/> Small Entity			
<input type="checkbox"/> No additional fee is required for this amendment.						
<input type="checkbox"/> Please charge Deposit Account No. _____ in the amount of \$ _____ A duplicate copy of this sheet is enclosed.						
<input checked="" type="checkbox"/> A check in the amount of \$ 309.00 to cover the filing fee is enclosed.						
<input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.						
<input checked="" type="checkbox"/> The Director is hereby authorized to charge and credit Deposit Account No. 04-0100 as described below. A duplicate copy of this sheet is enclosed.						
<input checked="" type="checkbox"/> Credit any overpayment.						
<input checked="" type="checkbox"/> Charge any additional filing or application processing fees required under 37 CFR 1.16 and 1.17.						
				Dated: October 16, 2003		
Paul F. Fehlner, Ph.D. Attorney Reg. No.: 35,135						
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